

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name

City of Tracy

Division, Department, or Region (if applicable)

City Manager's Office

Designated Agency Contact (Name, Title)

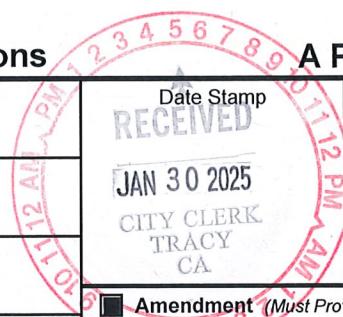
Adrienne Richardson

Area Code/Phone Number

209-831-6105

E-mail

adrienne.richardson@cityoftracy.org



Date Stamp

JAN 30 2025

CITY CLERK
TRACY
CA

California Form

802

For Official Use Only

Amendment (Must Provide Explanation in Part 3.)

07/25/2023

Date of Original Filing: (month, day, year)

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 100.00

Event Description: Tracy Chamber of Commerce Gala Date(s) 01/27/2023
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Tracy Chamber of Commerce
Name of Source

Was ticket distribution made at the behest Yes No If yes: _____
of agency official? Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Passes	Describe the public purpose made pursuant to the agency's policy		
City Manager's Office	3	To support and/or show appreciation for community and/or non-profit programs or services benefiting City residents.		
Police Department	1	To support and/or show appreciation for community and/or non-profit programs or services benefiting City residents.		
B. Name of Individual (Last, First)	Number of Ticket(s)/Passes	Identify one of the following:		
Young, Nancy (Mayor)	1	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:		
Arriola, Dan (Council Member) Bedolla, Mateo (Council Member) Davis, Eleassia (Mayor Pro Tem) Evans, Dan (Council Member)	4	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: To support and/or show appreciation for community and/or non-profit programs or services benefiting City residents.		
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Passes	Describe the public purpose made pursuant to the agency's policy		
N/A				

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Adrienne Richardson

City Clerk

01/30/2025

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)

Comment: _____

Print

Clear